

Request To Take Food Off Site

Must be submitted to SNP 5 business days prior to field trip

Must be approved by SNP to claim meals

Any changes must be submitted to SNP prior to field trip or meals will not be reimbursed

Facility Name: _____

Agreement Number _____

Requested date/s to take food off site: _____

Reason: _____

Explain in detail how you will ensure the safety and quality of the meals by using adequate storage equipment when transporting meals. _____

How will sponsor meet requirements for meal pattern and accountability that each child receives a reimbursable meal? _____

ALL HEALTH REGULATIONS APPLY

Person Submitting Request _____

Print Name

Signature

Date

___ Approved

___ Denied

SA Representative _____

(State Agency: Retain original for file, send a copy to facility)